

116TH CONGRESS
2D SESSION

H. R. 6489

To improve military family readiness.

IN THE HOUSE OF REPRESENTATIVES

APRIL 10, 2020

Mr. THORNBERRY (for himself and Mr. KELLY of Mississippi) introduced the following bill; which was referred to the Committee on Armed Services

A BILL

To improve military family readiness.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*
3 **SECTION 1. FAMILY READINESS: DEFINITIONS; COMMU-**
4 **NICATION STRATEGY; REPORT.**

5 (a) DEFINITIONS.—Not later than six months after
6 the date of the enactment of this Act, the Secretary of
7 Defense, in coordination with the Secretaries of the mili-
8 tary departments, shall define the terms “military family
9 readiness” and “military family resiliency”.

10 (b) COMMUNICATION STRATEGY.—Not later than one
11 year after the date of the enactment of this Act, the Sec-
12 retary of Defense, in coordination with the Secretaries of

1 the military departments, shall establish and implement
2 a strategy regarding communication with military fami-
3 lies. The strategy shall include the following:

4 (1) The use of a variety of modes of commu-
5 nication to ensure the broadest means of commu-
6 nicating with military families.

7 (2) Updating an existing annual standardized
8 survey that assesses military family readiness to ad-
9 dress the following issues:

10 (A) Communication with beneficiaries.
11 (B) Child care.
12 (C) Education.
13 (D) Spousal employment.
14 (E) The Exceptional Family Member Pro-
15 gram.

16 (F) Financial literacy.
17 (G) Financial stress.
18 (H) Health care (including copayments,
19 network adequacy, and the availability of ap-
20 pointments with health care providers).

21 (c) REPORT.—Not later than 180 days after the date
22 of the enactment of the Act, the Secretary of Defense shall
23 submit to the Committees on Armed Services of the Sen-
24 ate and the House of Representatives a report regarding
25 the feasibility of implementing the recommendations in—

9 SEC. 2. STANDARDIZATION OF THE EXCEPTIONAL FAMILY

10 MEMBER PROGRAM.

11 (a) POLICY.—Not later than six months after the
12 date of the enactment of this Act, the Secretary of De-
13 fense, in coordination with the Secretaries of the military
14 departments, shall, to the extent practicable, standardize
15 the Exceptional Family Member Program (in this section
16 referred to as the “EFMP”) across the military depart-
17 ments.

18 (b) ELEMENTS.—The EFMP, standardized under
19 subsection (a), shall include the following:

20 (1) Processes for the identification and enrollment
21 of dependents of covered members with special
22 needs.

1 tinuity of services at the new permanent duty sta-
2 tion.

3 (3) A review process for installations to ensure
4 that health care furnished through the TRICARE
5 program, special needs education programs, and in-
6 stallation-based family support programs are avail-
7 able to military families enrolled in the EFMP.

8 (4) A standardized respite care benefit across
9 the covered Armed Forces, including the number of
10 hours available under such benefit to military fami-
11 lies enrolled in the EFMP.

12 (5) Outcomes and metrics to evaluate the
13 EFMP.

14 (6) A requirement that the Secretary of each
15 military department provide a dedicated EFMP at-
16 torney, who specializes in education law, at each
17 military installation—

18 (A) the Secretary determines is a primary
19 receiving installation for military families with
20 special needs; and

21 (B) in a State that the Secretary deter-
22 mines has historically not supported families
23 enrolled in the EFMP.

1 (7) The option for a family enrolled in the
2 EFMP to continue to receive all services under that
3 program and the bachelor allowance for housing if—

4 (A) the covered member receives a new
5 permanent duty station; and

6 (B) the covered member and family elect
7 for the family not to relocate with the covered
8 member.

9 (8) A process to discuss policy challenges and
10 opportunities, best practices adopted across the cov-
11 ered Armed Forces, a forum period for discussion
12 with members of military families with special needs,
13 and other matters the Secretary of Defense deter-
14 mines appropriate.

15 (c) CASE MANAGEMENT.—The Secretary of Defense,
16 in coordination with the Secretaries of the military depart-
17 ments, shall develop an EFMP case management model,
18 including the following:

19 (1) A single EFMP office, located at the head-
20 quarters of each covered Armed Force, to oversee
21 implementation of the EFMP and coordinate health
22 care services, permanent change of station order
23 processing, and educational support services for that
24 covered Armed Force.

1 (2) An EFMP office at each military installation
2 with case managers to assist each family of a
3 covered member in the development of a plan that
4 addresses the areas specified in subsection (b)(1).

5 (d) REPORT.—Not later than 180 days after the date
6 of the enactment of the Act, the Secretary of Defense shall
7 submit to the Committees on Armed Services of the Sen-
8 ate and the House of Representatives a report on the im-
9 plementation of the items identified under subsections (a),
10 (b), and (c), including any recommendations of the Sec-
11 etary regarding legislation.

12 (e) GAO REPORT.—Not later than one year after the
13 date of the enactment of this Act, the Comptroller General
14 of the United States shall submit to the Committees on
15 Armed Services of the Senate and the House of Represent-
16 atives a report on—

17 (1) whether military families have higher rates
18 of disputes and loss of free and appropriate public
19 education under section 504 of the Rehabilitation
20 Act of 1973 (Public Law 93–112; 29 U.S.C. 794)
21 than civilian counterparts; and

22 (2) an analysis of the number of due process
23 hearings that were filed by school districts against
24 children of members of the Armed Forces.

25 (f) DEFINITIONS.—In this section:

1 (1) The term “covered Armed Force” means an
2 Armed Force under the jurisdiction of the Secretary
3 of a military department.

4 (2) The term “covered member” means a mem-
5 ber—

6 (A) of a covered Armed Force; and
7 (B) with a dependent with special needs.

8 **SEC. 3. CHILD CARE.**

9 (a) 24-HOUR CHILD CARE.—If the Secretary of De-
10 fense determines it feasible, the Secretary shall furnish
11 child care to each child of a member of the Armed Forces
12 or employee of the Department of Defense while that
13 member or employee works on rotating shifts at a military
14 installation.

15 (b) METRICS.—Not later than six months after the
16 date of the enactment of this Act, the Secretary of Defense
17 shall develop and implement metrics to evaluate the effec-
18 tiveness of the child care priority system of the Depart-
19 ment of Defense, including—

20 (1) the speed of placement for children of mem-
21 bers of the Armed Forces on active duty;

22 (2) the type of child care offered;

23 (3) available spaces in such system, if any; and

24 (4) other metrics to monitor the child care pri-
25 ority system determined by the Secretary.

1 (c) REPORT.—Not later than 180 days after the date
2 of the enactment of the Act, the Secretary of Defense shall
3 submit to the Committees on Armed Services of the Sen-
4 ate and the House of Representatives a report regarding
5 the results of a study that evaluates—

6 (1) the sufficiency of the stipend furnished by
7 the Secretary to members of the Armed Forces re-
8 ceived for civilian child care; and

9 (2) whether the amount of such stipend should
10 be based on—

11 (A) cost of living in the applicable locale;
12 and

13 (B) the capacity of licensed civilian child
14 care providers in the local market.

15 **SEC. 4. STUDY AND REPORT ON THE PERFORMANCE OF**
16 **THE DEPARTMENT OF DEFENSE EDUCATION**
17 **ACTIVITY.**

18 (a) STUDY.—The Secretary of Defense shall conduct
19 a study on the performance of the Department of Defense
20 Education Activity.

21 (b) ELEMENTS.—The study under subsection (a)
22 shall include the following:

23 (1) A review of the curriculum relating to
24 health, resiliency, and nutrition taught in schools op-
25 erated by the Department of Defense Education Ac-

1 tivity and a comparison of such curriculum to appropriate education benchmarks.

3 (2) An analysis of the outcomes experienced by
4 students in such schools, as measured by—

5 (A) the performance of such students on
6 the National Assessment of Educational
7 Progress carried out under section 303(b)(3) of
8 the National Assessment of Educational
9 Progress Authorization Act (20 U.S.C.
10 9622(b)(3)); and

11 (B) any other methodologies used by the
12 Department of Defense Education Activity to
13 measure individual student outcomes.

14 (3) An assessment of the effectiveness of the
15 School Liaison Officer program of the Department
16 of Defense Education Activity in achieving the goals
17 of the program with an emphasis on goals relating
18 to special education and family outreach.

19 (c) REPORT.—Not later than 180 days after the date
20 of the enactment of the Act, the Secretary of Defense shall
21 submit to the Committees on Armed Services of the Sen-
22 ate and the House of Representatives a report that in-
23 cludes the findings of the study conducted under sub-
24 section (a).

1 **SEC. 5. REPORT ON AUTISM TREATMENTS PROVIDED**
2 **UNDER TRICARE PROGRAM.**

3 (a) REPORT.—Not later than one year after the date
4 of the enactment of this Act, the Secretary of Defense
5 shall submit to the Committees on Armed Services of the
6 Senate and the House of Representatives a report assess-
7 ing the effectiveness of autism treatment methodologies
8 under the TRICARE program and the prevalence of au-
9 tism among dependents of members of the Armed Forces.

10 (b) ELEMENTS.—The report under subsection (a)
11 shall include the following:

12 (1) An assessment of the effectiveness of ap-
13 plied behavioral analysis and other autism treatment
14 methodologies covered under the TRICARE pro-
15 gram, including an independent assessment con-
16 ducted by an academic institution or other similar
17 nongovernmental entity of the Pervasive Develop-
18 mental Disorder Behavior Inventory as a basis for
19 drawing conclusions regarding such treatment.

20 (2) A descriptive analysis of copayment and
21 other out-of-pocket expenses for covered beneficiaries
22 who receive benefits under the Department of De-
23 fense Comprehensive Autism Care Demonstration
24 program.

1 (3) A comparison of rates of autism among de-
2 pendents of members of the Armed Forces and such
3 rates among the civilian population.

4 (c) TRICARE PROGRAM DEFINED.—In this section,
5 the term “TRICARE program” has the meaning given
6 that term in section 1072 of title 10, United States Code.

7 **SEC. 6. REPORT ON BEHAVIORAL HEALTH STAFFING
8 NEEDS.**

9 Not later than 180 days after the date of the enact-
10 ment of this Act, the Secretary of Defense shall submit
11 to the Committees on Armed Services of the Senate and
12 the House of Representatives a report that—

13 (1) contains specific information on the amount
14 of funding needed to hire and retain behavioral
15 health professionals to treat members of the Armed
16 Forces and covered beneficiaries (as defined in sec-
17 tion 1072 of title 10, United States Code);

18 (2) identifies the number and types of military,
19 civilian, direct contract, and managed care support
20 contract behavioral health professionals required to
21 treat such individuals; and

22 (3) contains a plan to provide behavioral health
23 treatment to such individuals using telehealth serv-
24 ices and other technologies, including any rec-
25 ommendations of the Secretary regarding legislation.

1 **SEC. 7. POLICY TO ADDRESS OPIOID PRESCRIPTION ABUSE**

2 **PREVENTION.**

3 (a) REQUIREMENT.—The Secretary of Defense shall
4 develop a policy and tracking mechanism for opioids that
5 monitors and prohibits the over prescribing of opioids to
6 ensure compliance with clinical practice guidelines.

7 (b) ELEMENTS.—The requirements under subsection
8 (a) shall include the following:

9 (1) Limit the prescribing of opioids to the mor-
10 phine milligram equivalent level per day specified in
11 the guideline published by the Centers for Disease
12 Control and Prevention titled “CDC Guideline for
13 Prescribing Opioids for Chronic Pain—United
14 States, 2016”, or such successor guideline.

15 (2) Limit the supply of opioids to within clini-
16 cally accepted guidelines.

17 (3) Develop a waiver process for specific patient
18 categories that will require treatment beyond the
19 limit specified in paragraph (1).

20 (4) Implement controls to ensure that the pre-
21 scriptions in the military health system data reposi-
22 tory exist and that the dispense date and the metric
23 quantity field for opioid prescriptions in liquid form
24 are consistent among all systems.

4 (6) Develop metrics that can be used by the
5 Defense Health Agency and each military medical
6 treatment facility to actively monitor and limit the
7 over prescribing of opioids.

8 (7) Develop a report that tracks progression to-
9 ward reduced levels of opioid use.

10 SEC. 8. SPOUSAL EMPLOYMENT PILOT PROGRAM WITH THE
11 DEFENSE COUNTERINTELLIGENCE AND SE-
12 CURITY AGENCY.

(a) IN GENERAL.—The Under Secretary of Personnel and Readiness, in coordination with the Under Secretary of Defense for Intelligence and Security, shall conduct a pilot program with the Defense Counterintelligence and Security Agency to recruit military spouses into a paid internship pilot program that includes specific training and on-the-job training designed to prepare the spouse for a position within the national security field, including the Federal Government and cleared industry.

22 (b) DURATION.—The Under Secretary of Personnel
23 and Readiness shall conduct the pilot program for a period
24 not to exceed three years.

1 (c) SECURITY TRAINING.—The pilot program under
2 this section shall permit military spouses the opportunity
3 to gain experience in a variety of areas, including security
4 clearance background investigations and personnel vet-
5 ting, industrial security and critical technology protection,
6 and counterintelligence analysis.

7 (d) REPORTS.—

8 (1) INTERIM REPORT.—Not later than one year
9 after the date of the enactment of the Act, the Sec-
10 retary of Defense shall submit to the Committees on
11 Armed Services of the Senate and the House of Rep-
12 resentatives a report on the status of the pilot pro-
13 gram that shall include the following:

14 (A) Number of spouses that entered the
15 pilot program.

16 (B) Metrics to be used to measure the ef-
17 fectiveness of the pilot program.

18 (C) A description of the employment posi-
19 tions that spouses entered into after the pilot
20 program.

21 (2) FINAL REPORT.—Not later than 180 days
22 after the end of the pilot program, the Secretary of
23 Defense shall submit to the congressional commit-
24 tees specified in paragraph (1) a final report on the
25 pilot program that shall include the following:

- 1 (A) Number of spouses that completed the
2 pilot program.
- 3 (B) An evaluation of the pilot program
4 using the metrics of assessment set forth pursu-
5 ant to paragraph (1)(B).
- 6 (C) A description of the employment posi-
7 tions that spouses entered into following the
8 pilot program.

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